

Alaska Interagency Training Nomination



Submit one nomination form for each class. Nominees must meet National prerequisites for each NWCG-sanctioned course. See Alaska Interagency Training Bulletin for recommended or suggested prerequisites for other courses.

PART 1: Course Information

Course Name: _____

Course Date(s): _____

Course Location (city): _____

PART 2: Registration

Nominee's Name(s)	Working Job Title	Office	Priority	Host Use Only
			1	
			2	
			3	
			4	
			5	
			6	
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			8	
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			10	
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			12	
			13	
			14	
			15	

If more space is needed, attach separate sheets to the back of this form. Please use the same format for the nominations.

PART 3: Certification

I certify that the above-named persons meet all of the NWCG and/or Agency prerequisites for this course, or will complete those prerequisites before taking this class.

Signature of nominating official

Date